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| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10569319 | <b>Applicant(s)/Patent Under Reexamination</b><br>TOURAPIS ET AL. |
|   | <b>Examiner</b><br>Emmanuel Bayard         | <b>Art Unit</b><br>2611   |

| ORIGINAL           |                                   |          |  |  |  | INTERNATIONAL CLASSIFICATION |   |   |   |           |             |  |  |  |  |  |  |  |  |
|--------------------|-----------------------------------|----------|--|--|--|------------------------------|---|---|---|-----------|-------------|--|--|--|--|--|--|--|--|
| CLASS              |                                   | SUBCLASS |  |  |  | CLAIMED                      |   |   |   |           | NON-CLAIMED |  |  |  |  |  |  |  |  |
| 375                |                                   | 240.16   |  |  |  | H                            | 0 | 4 | N | 7 / 12 () |             |  |  |  |  |  |  |  |  |
| CROSS REFERENCE(S) |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
| CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
| 375                | 240.16                            |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
| 348                | 620                               |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |           |             |  |  |  |  |  |  |  |  |

| <input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|--|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final  | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
|  | 1        |       | 17       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 2        |       | 18       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 3        |       | 19       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 4        |       | 20       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 5        |       | 21       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 6        |       | 22       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 7        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 8        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 9        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 10       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 11       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 12       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 13       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 14       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 15       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 16       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

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|---|------------|-----------------------------|-------------------|
| NONE  |            | Total Claims Allowed:<br>22 |                   |
| (Assistant Examiner)                                | (Date)     |                             |                   |
| /Emmanuel Bayard/<br>Primary Examiner:Art Unit 2611 | 04/18/2011 | O.G. Print Claim(s)         | O.G. Print Figure |
| (Primary Examiner)                                  | (Date)     | 1                           | 8                 |